WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Crash Date	PM otified PM Lane Clo	School Bus F NO	Work Zone	Time / 12:42 Total 01 Tags	Arrived 2 PM Injured Trailer or 1 Reco	Total Killed 00 Fowed [Reporting Threshold Secondary Crash
Date Notified	PM otified PM Lane Cic tive School Zone Type 0 (STANDARD CRAS	O6/05/2021 Total Units 02 osure School Bus F NO	Work Zone	Totali 01 Tags	Pho 914	oonstruction By	Secondary Crash
O6/05/2021 12:31 On Emergency Hit and Ru Government Property Ac V Reportable Crash T DT400 Description	tive School Zone ype 0 (STANDARD CRA	OSUTE School Bus F		01 Tags	mended Rec Pho 914	oonstruction By	Secondary Crash
Government Ac Property Crash T DT400 Description	tive School Zone ype 0 (STANDARD CRA	School Bus F NO		Tags	Red Pho	construction By	Secondary Crash
Property Crash T DT400 Description	ype 0 (STANDARD CRA	NO (SH)	Related		Pho 914	otos By 40 ditional Informa	Crash
Reportable Crash TDT400 Description	Õ (STANDARD CRA			□ ^A	Pho 914	otos By 40 ditional Informa	Crash
-	Rainbow 	r Road		Φ	Pho 914	otos By 40 ditional Informa	
Diagram	Rainbow 	r Road		Φ	Pho 914	otos By 40 ditional Informa	
			Į.	*	Add PH	titional Informa OTOS	ition
	(<u>1</u>			USH 1	4		
Not To Scale	Rainbow	Road					
I, a sworn law enforcement office ON 06-05-21 UNIT 1 WAS EASTBOUND ON I							

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Crash Date 06/05/2021

L	ocation ====										
	ON USH14 EB					Latitude			Longitud		
	64 FT N					43.1796	47017		-90.055	939516	
- 1	OF RAINBOW RD IN THE VILLAGE OF SPRI	NG GREEN				X Coordin	ate		Y Coord		
	IN SAUK COUNTY	NO ONLLN				251634.65625 4785299					
						Structure Type NO STRUCTURE					
C	rash Scene										
	First Harmful Event					First Harm	nful Event L	ocation			
1	MOTOR VEH IN TRANSPO	ORT				ON ROADWAY					
h	Manner of Collision					Light Con	dition				
1	03 - FRONT TO REAR					DAYLIG	HT				
П	Road Surface Condition(s)				Roadway Factor(s)						
1	DRY										
h	Environment Factor(s)					1					
	NONE					NONE					
H	Weather Condition(s)				1						
	CLEAR										
	Animal Type				Poleties T	To Trafficus	N/				
ľ	cumuai i ype			Relation To Trafficway TRAFFICWAY - ON ROAD							
H	Crash Classification - Location					Crash Classification - Jurisdiction					
1	PUBLIC PROPERTY						NO SPECIAL JURISDICTION				
	Fribal Land					Access Control Special Study PARTIAL CONTROL					
1	Within Interchange Area	nin Interchange Area Junction Location INTERSECTION				tion Type WAY INTERSECTION psure					
L	Closure Type				ons for Clos						
ı	FULL CLOSURE										
1	Date Initial Lane/Rd Closed Time Initial Lane/Rd Closed 12:40 PM				ENFORC	EMENT, TOW TRUCK, FIRE/EMS					
	Date All Lanes Open	Time All Lanes Open		1	Scene Clea	red	- 1	ne Scene Cleared			
L	06/05/2021	01:40 PM		06/05	5/2021		01	:45 PM			
	Init Summary 💳					16		T			
1	Unit Status IN TRANSIT			LASS	erating As C	lassification	3	Unit Type AUTOMOE) II E		
	Vehicle Type		150	LASS				Operating As Endorsements			
1	PASSENGER CAR		ed Total#Citations Issued					Operating As Endorsements			
r	Total Occs	Train/Bus#Recorded				Total Traile		ers Total Ha:		zMatTypes	
L	1		2				0		0		
1	Insurance? NO	Direction Of Travel EASTBOUND		Pre	CrashTire	•	Speed Lir			es	
	NO Most Harmful Event: Collision V			cial Fur	Mark		55	Emergency	2 Emergency Motor Vehicle Use		
1	MOTOR VEH IN TRANSPO				IAL FUNC	TION		NOT APPL	ICABLE	iicie Ose	
F	Traffic Way							Traffic Control Inoperative/Missing			
-	TWO-WAY, NOT DIVIDED		NO	CONT	ROL			NO			
Surface Type			- 1	id Curva				Road Grade			
	BLACKTOP (BITUMINOUS Truck Bus or HazMat	5)	ST	RAIGH	ı			LEVEL			
l	Truck Bus or HazMat NO										
	Vehicle										
	License Plate Number	and the second and th		ite Type		and the same and the same and the	St	Country of Iss		The second secon	
	ALH8069				JTOMOBIL						
	Vehicle Identification Nur WBADT63481CF1056		Ma	ıke /IW			Year 2001	1			
	- 10040 (OF 100)	, v	58	15 T V			2001	1 2201			

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		Color WHI - WHITE		Body Style 4D - 4DR	Bus Use						
	ш	Initial Contact Point		Vehicle Damage	I.						
UNIT	Ö	12 - FRONT									
5	VEHICLE	Extent Of Damage FUNCTIONAL DAMAGE		2 - FRONT							
		Towed Due To Damage		Vehicle Removed By							
		TOWED DUE TO DISABLII		GEORGES AUTO BODY							
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors							
		Driver Prior Action Other		NOT APPLICABLE							
	Driver Actions FAILURE TO CONTROL, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER										
	5										
UNIT	VEHICI										
	7										
1		Owner Name		Owner Address							
10	5	CHRISTOPHER THOMAS (608) 475-7398	WYSONG	138 E RICHLAND ST LONE ROCK, WI 53556 , US							
		, ,									
		Sequence Of Events									
	10	Event MOTOR VEH IN TRANSPO									
	62	Event									
	0	Frank									
	03	Event									
	74	Event									
		ndividual									
1		Driver CHRISTOPHER THOMAS		Citations Issued	Sex						
	AL	(608) 475-7398	W I SONG	2 Date of Birth	MALE Race						
⊢	3			WHITE							
UNIT	INDIVIDUA	Address 138 E RICHLAND ST		Driver License Number	•						
_	X	LONE ROCK, WI 53556 , U	JS .	STATE: WISCONSIN COUNTRY: UNITED STATES							
	Ç.,	On Duty ety Equipment	Crash	Safety Equipment							
	7	Row	SeatPosition	SHOULDER & LAP BELT							
-		01 - FRONT ROW	07 - LEFT								
		HelmetUse		Helmet Compliance							
		Eye Protection		Tint Compliance							
_	_	injury Se	verity	Airbag							
9	8	V33300-000-200-20033310-000-11120-000-220-1-1	ARENT INJURY	NON DEPLOYED							
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APP	LICABLE	Trapped/Extricated NOT TRAPPED						
		Medical Transport		EMS Agency Identifier	EMS Run#						
		NOT TRANSPORTED									
		Hospital		Date of Death	Time of Death						

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		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)												
		Distracted By Action			522 (110) 510 //	-	,,,,,							
		NOT DISTRACTED)											
	Non Motorist Striking Unit # Location													
		Prior Action												
	Action													
<u>.</u>	UAL													
	NDWIDUAL													
	INC													
		Action Other										To/From School		
		7.0007.007.0	Sugno	cted Alcoh			Suspected Drug Use					TON TONI CONCOR		
	I	Drug & Alcohol	NO	cted Alconi			NO			T				
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test T					Alcohol Tes	t Results	ilts		
		Drug Test Given TEST NOT GIVEN			Drug Test Type	e Drug Test Results								
5	Drug Type													
		Individual Condition												
		APPEARED NORMAL												
		Violations	s181818181818	*******	STREET STREET STREET STREET STREET	615161		ere ere ere e		******	******			
	0.1	UTC Number BD759471	Issue ¹	To? 5	Statute Number 344.62(1)		Description OPERATE MOTOR	/EHICI	E W/O IN	SURANCE	<u>амиононалиононалио</u>			
	02	UTC Number BD759472					Description INATTENTIVE DRIVING							
	Uni	Summary •		•										
		Status RANSIT					hicle Operating As Class CLASS	ification		Unit Type MOTORC	YCLE			
05	Vehi MO I	cle Type PED								Operating A	s Endorsem	nents		
		lOccs	Т	rain/Bus#	Recorded	To	tal#Citations Issued		Total Traile	l ers	Total HazN	/lat Types		
-	Insu	rance?		Direction Of			Pre CrashTire Mark		Speed Lim	nit	Total Lane	S		
LINO		st Harmful Event: Collision With					ecial Function O SPECIAL FUNCTIO	N		Emergency Motor Vehicle Use NOT APPLICABLE				
	Traffic Way TWO-WAY, NOT DIVIDED				affic Control CONTROL			Traffic Control Inoperative/Missing						
		Surface Type BLACKTOP (BITUMINOUS)					oad Curvature		Road Grade LEVEL					
		k Bus or HazMat	,							l				
		Vehicle				000			*******					
		License Plate Number	•				late Type		St WI	Country of Is				
						تــــــــــــــــــــــــــــــــــــــ								

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엉	N	Vehicle Identification Number		Ma	ke	Year	Model		
0	8	L9NTCGPGXM1300212		TA	OTAO GROUP CO LTD	2021	UNKNOWN		
		Color RED - RED		Body Style MC - MOTORCYCLE Bus Use					
١.	ш	Initial Contact Point		Vel	nicle Damage				
	<u> </u>	06 - REAR		١.,					
5	VEHICLE	Extent Of Damage DISABLING DAMAGE			06 - REAR				
		Towed Due To Damage			nicle Removed By				
		TOWED DUE TO DISABLE What Driver Was Doing	ING DAWAGE	_	ORGES AUTO BODY				
		STOP IN TRAFFIC		Ver	ncie ractors				
		Driver Prior Action Other		NOT APPLICABLE					
TIND	VEHICLE	Driver Actions NO CONTRIBUTING ACT	ION						
02	02	Owner Name TRACY ANN THADEN (608) 807-8957			Owner Address S11478 SOELDNER RD SPRING GREEN, WI 535	88 , US			
	10	Sequence Of Events Event MOTOR VEH IN TRANSP							
		Event							
	8								
	03	Event							
	3	Event							
ᆫ		Policy Holder							
		Insurance Company		ndividu al					
⊃		AMERICAN-FAMILY-INS-	co	-	FRACY THADEN				
		Individual							
		Driver			Citations ssued	<u>HANDEHANDEHANDE</u>	Sex		
		TRACY ANN THADEN (608) 807-8957		[0			FEMALE		
_	NDWIDUA	(000) 001 0001		E	Date of Birth		Race WHITE		
E S	Ē	Address		E	Driver License Number				
-	9	S11478 SOELDNER RD			TATE: WIRCONGIN COLL	NTOV. HAR	ITED STATES		
		SPRING GREEN, WI 5358	8 , US	STATE: WISCONSIN COUNTRY: UNITED STATES					
	٠.	On Dut	y Crash	Ŧ	Protective Gear				
	oa.		T						
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	`	JACKET, LONG PANTS				
		HelmetUse		+	Helmet Compliance				
		FULL-FACE		1	APPROVED				
		Eye Protection		- 1	int Compliance				
		YES: WORN	everity		JNKNOWN Airbag				
05	8	Injury S Injury SUSPI	ECTED SERIOUS INJUR	- 1	NOT APPLICABLE				
		Ejected	Ejection Path				Trapped/Extricated		
		NOT APPLICABLE	NOT EJECTED/NOT AF	PLIC	ABLE		NOT TRAPPED		

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		Medical Transport EMS AIR		EMS Agency Identifier 531	EMS Run#			
					Ti 5 D 45			
		Hospital UNIVERSITY OF WI HOSPITALS & (CLINICS AUT	Date of Death		Time of Death		
		Distracted By NOT APPLICABLE	E (NOT DISTRA	CTED)				
		Distracted By Action NOT DISTRACTED						
		Striking Unit#	Location					
		Prior Action						
		Action						
	¥							
E S	INDIVIDUAL							
_	2							
		Action Other					To/From School	
		Suspected Alcohol U	Se	Suspected Drug Use NO				
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN	Drug Test Type					
8	005	Drug Type						
		Individual Condition						
		NOT OBSERVED						
	Wit	ness						
, 01	TO	ridual DD MICHAEL KNIGHT 8) 228-3669		Address 211 N BRISTOL ST SUN PRAIRIE, WI 535	ate of Birth			
WITN								
	Witness							
02	DAV	vidual /!D G MOL!TOR 3) 333-6078		Address 608 STONEFIELD WAY MOUNT HOREB, WI 53572 , US				
WITN 02 ESS 02	,550	-, 00, 0		movement of the second				
		ness -						
03	LYN	/idual IN M WESSEL		Address 2181 SOUTH 99TH ST	D	ate of Birth		
WITN	(414	4) 315-1897		WEST ALLIS, WI 5322				